

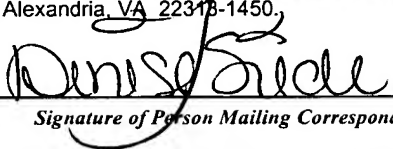



TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))			Docket No. 2003-1991.ORI
In Re Application Of: Reginald Charles Allsopp			
Serial No. 10/662,078	Filing Date 09/12/2003	Examiner	Group Art Unit
Title: IMPROVEMENTS IN CONTROL LIMITS			
<div style="display: flex; justify-content: space-between; align-items: flex-start;"><div style="width: 25%; text-align: center;"></div><div style="width: 70%; text-align: center;"><p>Address to:</p><p>Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p><p>37 CFR 1.97(b)</p><p>1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.</p><p style="text-align: center;">37 CFR 1.97(c)</p><p>2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:</p><div style="margin-left: 40px;"><p><input type="checkbox"/> the statement specified in 37 CFR 1.97(e);</p><p style="text-align: center;">OR</p><p><input type="checkbox"/> the fee set forth in 37 CFR 1.17(p).</p></div></div></div>			

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))			Docket No. 2003-1991.ORI
In Re Application: Reginald Charles Allsopp			
Serial No. 10/662,078	Filing Date 09/12/2003	Examiner	Group Art Unit
IMPROVEMENTS IN CONTROL LIMITS			
<div style="display: flex; justify-content: space-around; align-items: center;"><div style="text-align: center;"></div><div>Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))</div></div> <div style="margin-top: 10px;"><input type="checkbox"/> A check in the amount of _____ is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account 50-0789 as described below.<div style="margin-left: 40px;"><input type="checkbox"/> Charge the amount of _____ <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional fee required.</div></div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 48%;">Certificate of Transmission by Facsimile*<div style="border: 1px solid black; padding: 5px; margin-top: 5px;">I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. _____)</div><div style="border: 1px solid black; padding: 5px; margin-top: 5px;">_____ (Date)</div><div style="border: 1px solid black; padding: 5px; margin-top: 5px;">_____ Signature</div><div style="border: 1px solid black; padding: 5px; margin-top: 5px;">_____ Typed or Printed Name of Person Signing Certificate</div></div><div style="width: 48%;">Certificate of Mailing by First Class Mail<div style="border: 1px solid black; padding: 5px; margin-top: 5px;">I certify that this document and fee is being deposited on 12/08/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Signature of Person Mailing Correspondence Denise L. Siede</div><div style="border: 1px solid black; padding: 5px; margin-top: 5px;">_____ Typed or Printed Name of Person Mailing Certificate</div></div></div> <div style="margin-top: 20px;"><div style="display: flex; justify-content: space-between;"><div>*This certificate may only be used if paying by deposit account.  _____ Signature Mark J. Burns</div><div>Dated: December 8, 2003</div></div><div style="margin-top: 20px;">CC:</div></div>			

